PAULA T. DOW
ATTORNEY GENERAL OF NEW JERSEY
Division of Law
124 Halsey Street
P.O. Box 45029
Newark, New Jersey 07102
Telephone (973) 648-4735
Attorney for Board of Dentistry

By:

Nancy Costello Miller Deputy Attorney General

STATE OF NEW JERSEY
DEPARTMENT OF LAW & PUBLIC SAFETY
DIVISION OF CONSUMER AFFAIRS
STATE BOARD OF DENTISTRY

IN THE MATTER OF THE SUSPENSION OF THE LICENSE OF

JACK F. ALTOMONTE, D.D.S. License # 22DI 01519400

TO PRACTICE DENTISTRY
IN THE STATE OF NEW JERSEY

Administrative Action

CONSENT ORDER OF RESTRICTIONS ON OF LICENSURE

The State Board of Dentistry received information that Jack F. Altomonte, D.D.S. ("Dr. Altomonte" or "respondent"), was arrested on June 13, 2010 for driving while intoxicated and on June 26, 2010 for operating a motor vehicle under the influence of alcohol or other drugs and possession of narcotics. On September 2, 2010, respondent waived indictment, and on November 8, 2010, he was admitted into the Pre-Trial Intervention Program for a term of one year. Respondent enrolled in the Professional

Assistance Program (PAP) in July 2010 and has continued his participation with the PAP. On March 16, 2010, Dr. Altomonte appeared with Pamela Mandel, Esq., and with Edward Reading, Ph.D., of the PAP, at an inquiry before the Board. He discussed the events leading up to his arrests and the steps he has taken to avoid a repetition of the conduct.

Based on its review of the record developed, it appears to the Board that respondent has engaged in acts that subject him to discipline pursuant to N.J.S.A. 45:1-21 (e), (f) and (l). In order to avoid the initiation of formal action, respondent has now agreed to this consent order and to practice dentistry under its terms. The Board finds the terms of this consent order are appropriate and adequately protective of the public health, safety and welfare.

IT IS, therefore, on this  $4 \frac{\text{th}}{2}$  day of May, 2011,

## AGREED AND ORDERED THAT:

- 1. The license of Jack F. Altomonte, D.D.S., shall be suspended for a period of six months, which suspension shall be stayed and served as a period of probation. If respondent violates any terms of this order, in addition to any other relief as permitted by law, the stayed suspension shall be activated.
- 2. Until further order of the Board, respondent shall continue his participation with the Professional Assistance Program (PAP) and shall comply with any and all recommendations for treatment. In addition, respondent shall:
  - (a) have monthly face-to-face contact with representatives from that program;
  - (b) attend 12-Step recovery group meetings not less than three times a week;
  - (c) submit to urine monitoring not less than two times a week; and

(d) continue with psychotherapy on a weekly basis until such time as the therapist and the Executive Medical Director of the PAP agree in reduction of frequency, which reduction shall be reported to the Board within seven days of the change.

Respondent shall pay all costs associated with his participation in the PAP. If respondent discontinues participation with the Professional Assistance Program or fails to comply with the conditions imposed by the program or outlined in this consent order, he shall be deemed in violation of this order.

- 3. Respondent shall abstain from the use of all psychoactive substances, including alcohol, narcotics, and/or other medications unless prescribed by a treating physician for a documented medical condition with prior notification to the Executive Medical Director of the Professional Assistance Program of the diagnosis and prescribed medications. In addition, respondent shall advise any and all treating physicians and/or dentists of his history of alcohol abuse.
- 4. The Professional Assistance Program shall submit quarterly reports, including urine results, to the Board regarding respondent's participation and compliance with all requirements of the PAP and this order. If respondent has a positive urine, misses an appointment without consent, or has a lapse or slip in his recovery, or if respondent terminates recommended treatment or his participation with the PAP, the PAP shall immediately inform the Board. For purposes of this paragraph, "immediately" shall mean reporting the information orally within 24 hours and following up with a written report within 48 hours.

- 5. (a) Any failure by respondent to submit or provide a urine sample within twenty-four (24) hours of a request will be deemed to be equivalent to a confirmed positive urine test. In the event respondent is unable to appear for a scheduled urine test or provide a urine sample due to illness or other impossibility, consent to waive that day's test must be secured from the Professional Assistance Program. Respondent shall notify the Professional Assistance Program if he will be out of the State for any reason, so that the program may make a determination regarding alternate testing.
- (b) Any urine test result showing creatinine levels below 20 mg/dL and a specific gravity below 1.003 shall create a rebuttable presumption of a confirmed positive urine test. Any such result shall be followed immediately by a confirming GC/MS test.
- (c) Respondent shall familiarize himself with all foods, food additives or other products (such as poppy seeds) which may affect the validity of urine screens, be presumed to possess that knowledge, and shall refrain from the use of such substances. Ingestion of such substances shall not be an acceptable reason for a positive urine screen and/or failure to comply with the urine monitoring program.
- (d) The Professional Assistance Program may, after notifying the Board, modify the frequency of testing or method of testing during the monitoring period.
- 6. Respondent shall provide any and all releases to any and all parties who are participating in a monitoring, treatment, or other program as outlined in this order, as may be required in order that all reports, records, and other pertinent information may be provided to the Board in a timely manner. Respondent agrees that any information received by the Board regarding respondent's treatment or participation in a monitoring

program may be used in connection with any proceedings pertaining to his license.

7. Respondent may apply for relief from the terms of this order not sooner than one year from the date of its entry.

NEW JERSEY STATE BOARD OF DENTISTRY

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I have read and I understand the terms of this order and agree to be bound by it. I consent to the entry of this order.

Jack F. Altomonte, D.D.S.

I have read the terms of this order and agree on behalf of the Professional Assistance Program to comply with its terms as pertaining to the PAP.

Louis E. Baxter, Sr., M.D. Executive Medical Director Professional Assistance Program

<u>4/19/14</u> Date

I consent to the form and entry of this order.

Pamela Mandel, Esq.

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Attorney for Jack F. Altomonte, D.D.S.

∕<del>Date</del>

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